



*"People  
helping people  
help  
themselves"*

Mitchell E. Daniels, Jr., Governor  
State of Indiana

***DIVISION OF DISABILITY AND REHABILITATIVE SERVICES***

402 W. Washington Street, P.O. Box 7083

Indianapolis, IN 46207-7083

1-800-545-7763

TO: DD, Support Services & Autism Waiver Providers  
DD, Support Services & Autism Waiver Case Managers  
BDDS District Offices & BDDS Staff

FROM: Peter Bisbecos, Director  
Division of Disability and Rehabilitative Services

RE: The Annual Plan and Changes in Services

DATE: November 30, 2005

Since changing our system's focus from hours of service to quality of outcomes, we have seen many success stories. Teams have created effective plans for service delivery that will meet the needs of the individual, the family and the provider. For example, some families now have the opportunity to bring their family member home for dinner during the week. This had been discouraged by the provider under the old billing model. Other Teams have increased participation in community based Day Service activities. One provider is now offering a bowling league for individuals to participate in during the evening hours. These solutions, and many others, are the consequence of strong and creative teamwork. Consumers will benefit greatly from these solutions and we wanted to take the opportunity to congratulate those who have made these positive changes.

As suggested above, there are many ways for Teams to meet the needs of the individual. However, unilateral changes, made without agreement of the team, are unacceptable. With the added flexibility of the Annual Plan and the revised service definitions, it is expected that services for individuals will change to better reflect the realities of everyday life and the importance of working toward progress on outcomes. As the State has stated repeatedly, any service changes that occur must be done in accordance with the direction and agreement of the Individualized Support Team.

We have received copies of letters and e-mails sent to families indicating two common situations. In the first situation, individuals are told that as a direct result of the Annual Plan, their "hours of service" are being cut. In the second situation, services have been stopped, pending the result of a rate review for the individual. As Dave Gootee stated in the October 28, 2005, Annual Plan Clarification letter, this is wrong. The Individual Support Team, and not any one member, must drive decisions related to changes in service. Providers are obligated as Medicaid waiver providers to follow the established process for modifying plans of care and can not unilaterally cut services to consumers.



Cutting or stopping service under these conditions is unacceptable. DDRS will respond to any instance of unilateral service cuts immediately. As a result of the information we have received of inappropriate service cuts and/or stoppages, I am notifying specific providers that they must meet with me immediately. The purpose of these meetings will be to determine if the provider's actions have caused Serious Endangerment of the Individual's Health and Safety (Welfare), per 460 IAC 6-7-4. If it is determined the provider's unilateral actions have endangered the health or welfare of an individual such that an emergency exists, BDDS will take action as described in the rule.

There are many uncertainties in times of change, and we remain willing to work with you to resolve concerns and ensure that each consumer's goals are met effectively. In those situations where Individualized Support Teams can not come to agreement on how best to meet the needs of the individual, the Dispute Resolution process is available as described in 460 IAC 6-10-8. It is recognized that this process was designed to handle disputes between providers, if providers on the Team are in agreement, and the individual or family member is not, the Case Manager must represent the individual in the Dispute Resolution process. The guiding standards for the Service Coordinator in settling disputes will be the outcomes established for the individual in the ISP, the health and welfare needs of the individual and the BDDS Vision, Mission, Values and Principles.

We are making an effort to complete the rate review requests in a timely manner and have committed to adjusting rates back to November 1, 2005, if an adjustment is made. Under the Medicaid provider agreement, signed by all providers, providers are responsible for service delivery with the rate provided.

**We appreciate your help and cooperation as we clear up any misunderstandings regarding the implementation of the Annual Plan.**